## UNITED STATES DISTRICT COURT

## DISTRICT OF OREGON

FEDERAL TRADE COMMISSION, STATE OF ARIZONA, STATE OF CALIFORNIA, DISTRICT OF COLUMBIA, STATE OF ILLINOIS, STATE OF MARYLAND, STATE OF NEVADA, STATE OF NEW MEXICO, STATE OF OREGON, and STATE OF WYOMING

Plaintiff(s),

Case No.: 3:24-CV-00347
MOTION FOR LEAVE TO APPEAR <i>PRO HAC VICE</i>

THE KROGER COMPANY and ALBERTSONS COMPANIES, INC.,

v.

Defendant(s).

\_\_\_\_

Attorney Gina M. Tonn requests special admission *pro hac* vice to the Bar of the United States District Court for the District of Oregon in the above-captioned case for the purposes of representing the following party (or parties):

Third Party Target Corporation

In support of this application, I certify that: 1) I am an active member in good standing with the Minnnesota State Bar; and 2) that I have read and am familiar with the Federal Rules of Evidence, the Federal Rules of Civil and Criminal Procedure, the Local Rules of this Court, and this Court's Statement of Professionalism.

I understand that my admission to the Bar of the United States District Court for the District of Oregon is solely for the purpose of litigating in the above matter and will be terminated upon the conclusion of the matter.

## (1) PERSONAL DATA:

Name: Tonn		Gina		M	
(Last Name)		(First Name)		(MI)	(Suffix)
Agency/	firm affiliation:	Greene Espel PLL	Р		
Mailing address: 222 S 9th Street, Suite 2200					
City: Mi	inneapolis		State: MN	Zip:	55402
Phone number: 612.373.8378		.8378	_Fax number:	612.373.0929	
Business e-mail address: GTonn@greeneespel.com					

U.S. District Court – Oregon [Rev. 11/2019]

(2)	BAR ADMISSION INFORMATION:					
	(a)	State bar admission(s), date(s) of admission, and bar number(s): Minnesota State Bar, 05/12/2023, 0504172				
		Illinios State Bar, 01/14/2021, 6336865				
	(b) New	Other federal court admission(s) and date(s) of admission:  York Eastern District Court, 06/04/2024, Minnesota District Court, 05/09/2023				
	Utah District Court, 03/31/2023 New Jersey District Court, 07/26/2023					
(3)	CERTIFICATION OF DISCIPLINARY ACTIONS:					
X	I am not now, nor have I ever been, subject to any disciplinary action by any state or federal bar association or subject to judicial sanctions.					
	I am now or have been subject to disciplinary action by a state or federal bar association or subject to judicial sanctions. (Attach letter of explanation.)					
(4)	CERTIFICATION OF PROFESSIONAL LIABILITY INSURANCE: Pursuant to LR 83-3, I have professional liability insurance, or financial responsibility equivalent to liability insurance, that meets the insurance requirements of the Oregon State Bar for attorneys practicing in this District, and that will apply and remain in force for the duration of the case, including any appeal proceedings.					
(5)	CM/ECF REGISTRATION: I acknowledge that I will become a registered user of the Court's case management and electronic case filing system (CM/ECF) upon approval of this application, and I consent to electronic service pursuant to Fed. R. Civ. P. 5(b)(2)(E) and the Local Rules of the District of Oregon.					
		rney Seeking <i>Pro Hac Vice</i> Admission: I have read and understand the 3-3, and I certify that the above information is true and correct.				
DATED	): <u>06/27/</u>	<u>'2024</u>				
		(Signature)				
		(Signature)				

## REQUIREMENT TO ASSOCIATE WITH LOCAL COUNSEL:

LR 83-3(a)(1) requires applicants for pro hac vice admission to associate with local counsel, unless requesting a waiver of the requirement under LR 45-1. To request a waiver of the requirement to associate with local counsel under LR 45-1, check the following box: I seek admission for the limited purpose of filing a motion related to a subpoena that this Court did not issue. Pursuant to LR 45-1(b), I request a waiver of the LR 83-3(a)(1) requirement to associate with local counsel and therefore do not include a certification from local counsel with this application. To associate with local counsel, provide the following information about local counsel, and obtain the signature of local counsel. Name: Tuthill-Kveton Sarah (Last Name) (First Name) (MI)(Suffix) OSB number: 105324 Agency/firm affiliation: Chock Barhoum LLP Mailing address: 121 SW Morrison St., Suite 500  $City: \ \ \text{Portland}$ \_\_\_\_\_State: OR \_\_\_\_\_Zip: 97204 Phone number: (503)223-3000 \_\_\_\_Fax number: (503)954-3321 Business e-mail address: sarah@chockbarhoum.com **CERTIFICATION OF ASSOCIATE LOCAL COUNSEL:** I certify that I am a member in good standing of the bar of this Court, that I have read and understand the requirements of LR 83-3, and that I will serve as designated local counsel in case number 3:24-CV-00347 DATED: 06/27/2024 (Signature of Local Counsel